



Patent
Attorney Docket No. 1017753-000183

APPLICATION DATA SHEET

Application Information

Application Number:: 10/735,916

Filing Date:: December 16, 2003

Application Type:: Regular

Subject Matter:: Non Provisional

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: No

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:: No

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: NOVEL ANTI-IGF-IR ANTIBODIES AND USES
THEREOF

Attorney Docket Number:: 1017753-000183

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure::

Total Drawing Sheets:: 39

Small Entity?: No

Latin Name:

Variety Denomination Name:

Petition Included?:

Petition Type:

Licensed US Govt. Agency:

Contract or Grant Numbers:

Secrecy Order in Parent Appl.?:

Applicant Information

Applicant Authority Type: Inventor

Primary Citizenship Country: France

Status: Full Capacity

Given Name: Liliane

Middle Name:

Family Name: Goetsch

Name Suffix:

City of Residence: Ayze

State or Province of Residence:

Country of Residence: France

Street of Mailing Address: Route de Bonneville

City of Mailing Address: Ayze

State or Province of Mailing Address::

Country of Mailing Address:: France

Postal or Zip Code of Mailing Address:: 74130

Applicant Authority Type:: Inventor

Primary Citizenship Country:: France

Status:: Full Capacity

Given Name:: Nathalie

Middle Name::

Family Name:: CORVAIA

Name Suffix::

City of Residence:: Saint Julien en Genevois

State or Province of Residence::

Country of Residence:: France

Street of Mailing Address:: Residence des Chênes , 32, rue des Chênes

City of Mailing Address:: Saint Julien en Genevois

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 74160

Applicant Authority Type:: Inventor

Primary Citizenship Country:: France

Status:: Full Capacity

Given Name:: Olivier

Middle Name::

Family Name:: LEGER

Name Suffix::

City of Residence:: Annemasse

State or Province of Residence::

Country of Residence::

Street of Mailing Address:: Le Clos Saint André - 22, rue Marc Courriard

City of Mailing Address:: Annemasse

State or Province of Mailing Address::

Country of Mailing Address:: France

Postal or Zip Code of Mailing Address:: 74100

Applicant Authority Type:: Inventor

Primary Citizenship Country:: France

Status:: Full Capacity

Given Name:: Alain

Middle Name::

Family Name:: Duflos

Name Suffix::

City of Residence:: Labruguiere

State or Province of Residence::

Country of Residence:: France

Street of Mailing Address:: 7, rue Emile Caraguel

City of Mailing Address:: Labruguiere

State or Province of Mailing Address::

Country of Mailing Address:: France

Postal or Zip Code of Mailing Address:: 81290

Applicant Authority Type:: Inventor

Primary Citizenship Country:: France

Status:: Full Capacity

Given Name:: Jean-François

Middle Name::

Family Name:: HAEUW

Name Suffix::

City of Residence:: Beaumont

State or Province of Residence::

Country of Residence:: France

Street of Mailing Address:: 30, Domaine Du Salève

City of Mailing Address:: Beaumont

State or Province of Mailing Address::

Country of Mailing Address:: France

Postal or Zip Code of Mailing Address:: 74160

Applicant Authority Type:: Inventor
Primary Citizenship Country:: France
Status:: Full Capacity
Given Name:: Alain
Middle Name::
Family Name:: Beck
Name Suffix::
City of Residence:: Collonges-Sous-Salene
State or Province of Residence::
Country of Residence:: France
Street of Mailing Address:: 503, route du Poirier á l'âne
City of Mailing Address:: Collonges-Sous-Salene
State or Province of Mailing Address::
Country of Mailing Address:: France
Postal or Zip Code of Mailing Address:: 74160

Correspondence Information

Correspondence Customer Number:: 41790
Phone Number:: (858) 509-7300
Fax Number: (858) 509-7353

Representative Information

Representative Customer Number:: 41790

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing
Date::

Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|------------------|-----------------------------|----------------------|-------------------------------|
| France | 0200654 | 18 January 2002 | Yes |
| France | 0200653 | 18 January 2002 | Yes |
| France | 0205753 | 7 May 2002 | Yes |
| PCT | FR03/00178 | 20 January 2003 | Yes |
| France | 0308538 | 11 July 2003 | Yes |

Assignee Information

Assignee Name:: PIERRE FABRE MEDICAMENT

Street of Mailing Address:: 45, Place Abel Gance

City of Mailing Address:: Boulogne

State or Province of Mailing
Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing
Address:: 92100

|